

## PURPOSE

The City of Hillsboro are continuing to encourage revitalization and investment in Hillsboro. The Hillsboro Tenant Improvement Grant Program aims to increase the number of restaurants, wine bars, brewpubs, drinking establishments and curated retail shops available to Hillsboro visitors. The City seeks to partner with food, beverage, and specialty retail businesses and property owners interested in renovating or enhancing leased and owned spaces by providing matching tenant improvement grants.

Tenant improvement grants may be used for a variety of interior projects, such as:

- Permanent commercial kitchen elements (i.e. hoods, grease traps)
- Interior lighting
- Permanent bar
- ADA or seismic upgrading and other building code upgrades
- New interior walls



## ELIGIBILITY

Businesses are eligible if they meet the following criteria:

- Food, beverage, or curated retail use
- Open to the public
- Within the city of Hillsboro

All Downtown Economic Improvement District assessments must be paid in full.

National chains are not eligible to participate in this program.

## PROGRAM CONTACT

**Karla Antonini**  
Economic Development Project Manager  
karla.antonini@hillsboro-oregon.gov  
503-681-6181

## PROGRAM DETAILS

**Maximum Grant: \$40,000**

*Note: A business/space can receive a maximum of \$40,000 in TI grants within a 5-year period*

**Level I Grant (minor projects): 50% city match**

**Level II Grant (major projects): 70% city match**

*This is a pilot program with no application deadline*

## **ELIGIBILITY**

Businesses are eligible if they meet the following criteria:

The business is a food and/or beverage based business or is a curated retail use. Examples include restaurants, brewpubs, drinking establishments, and wine bars.

The business is open to the public. Businesses with age restrictions, such as bars, are eligible. Businesses that only provide services to members are not.

The business is located within the City of Hillsboro.

Exclusions: National chains, defined as franchises/for profit corporations that are not headquartered in the State of Oregon or Clark County Washington; except in the case where the franchisee or brand has a Hillsboro-based owner and the brand has no more than one location within the Hillsboro city limits at the completion of this grant.

## **GRANT APPLICATION PROCESS**

- 1) Contact the Project Manager to confirm your project is eligible:

Karla Antonini, Project Manager, Economic Development  
503-681-6181 or [Karla.Antonini@Hillsboro-Oregon.gov](mailto:Karla.Antonini@Hillsboro-Oregon.gov)

- 2) Identify scope of work and obtain bids as needed.
  - a. Prior to funding, three competitive bids for all project elements over \$5,000 will be required. Only one bid is required at time of application.
- 3) Complete and return this application.

Once approved:

- 4) A Letter of Commitment will be issued for both parties to sign. This is the grant contract.
- 5) Submit applications for all needed city permits.
  - a. Please contact the Building Department with any permit questions: 503-681-6144
- 6) Construction can begin once all permits have been approved.
- 7) Once the work is complete, submit all paid receipts to the City for reimbursement.
  - a. Please note: Reimbursement can be scheduled in phases, versus all at the end of a project. This negotiation will occur as part of the Letter of Commitment.

## Application

INCLUDE COPIES OF THE FOLLOWING FOR THIS APPLICATION TO BE COMPLETE

- Application
- Owner Authorization Form on page 8 (if Applicant is not the property owner)
- Before photos of the interior of property
- Any architectural drawings such as plans, elevations or sketches related to this project
- Bid(s) – Please note for all projects over \$5,000, three bids will be required prior to the Letter of Commitment being issued and work beginning. At time of application, however, only one bid is required.
- Applicant's W-9

### APPLICANT INFORMATION:

Project Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Are you the:  Business Owner  Property Owner

*(If the Applicant is not the owner of the property, the Owner Authorization Form on page 9 must be filled out and submitted with this application).*

### PROPERTY INFORMATION:

*(If Applicant is also the property owner, please answer this section. Otherwise leave blank as questions are repeated on the Owner Authorization Form).*

Building Owner Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Tax Account Number: \_\_\_\_\_ Year Building Built: \_\_\_\_\_

Has this property received other public funding or grants in the past five years?  Yes  No

If yes, please describe:

The City is committed to ensuring all programs represent Hillsboro's diverse population. Thank you for answering this question to help ensure we are successful.

What is the property owner's Racial/Ethnic Background?

- American Indian or Alaskan Native
- Asian
- Black or African American
- Hispanic/Latinx
- Native Hawaiian or Other Pacific Islander
- White
- Other, please specify:

**BUSINESS INFORMATION:**

Existing Business in This Location  New business in This Location

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Social Media:  Facebook  Twitter  Instagram  Other: \_\_\_\_\_

Age of Business: \_\_\_\_\_

How many other locations does this business have? \_\_\_\_\_ Tax ID/EIN Number: \_\_\_\_\_

Hillsboro Business License Number: \_\_\_\_\_

What are your hours: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ TH \_\_\_\_\_ F \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

How is your business organized (corporation, sole proprietorship, LLC, etc.):

In which state are incorporation and/or organization documents filed?

Oregon  Other: \_\_\_\_\_

Is this business certified as a:

- Minority Business Enterprise (MBE)
- Women Business Enterprise (WBE)
- Emerging Small Business (ESB)
- Service-Disabled Veteran Business (SDV)
- Disadvantaged Business Enterprise (DBE)
- None

Is this business a part of a national chain (see definition on page 2)?  Yes  No

Is this business a for-profit corporation with locations outside of Hillsboro?  Yes  No

Is this business church-owned, fraternal, or housed in a government building?  Yes  No

Is this business in a building that is primarily for residential use?  Yes  No

Does this business exclude minors?  Yes  No

Number of employees at this time: \_\_\_\_\_

Number of employees expected in two years: \_\_\_\_\_

Leasable square feet at this time: \_\_\_\_\_

Square feet expected in two years: \_\_\_\_\_

In one sentence, what does your business do?

How do customers reach you:

Transit

Bike

Car

Walk

How do you differentiate yourself from your competition?

What is the biggest challenge facing your company over the coming year?

Please describe relevant food/beverage service experience of key business players (business owner, head chef, restaurant manager, etc):

**PROJECT INFORMATION:**

This is a competitive grant program with limited funding: therefore, not all projects will be funded. Your answers to the questions below will inform us why you believe your application should be chosen over other applicants.

Describe proposed improvements and work to be completed:

How will these proposed improvements benefit your business/building:

How will these proposed improvements benefit Downtown Hillsboro:





**CERTIFICATION BY APPLICANT**

I, \_\_\_\_\_ certify that I am authorized to sign this application on behalf of Applicant. I understand that the City of Hillsboro (City) must approve the proposed interior tenant improvements. Certain changes or modifications may be required by the City prior to final approval.

I understand that the commitment of funds will not be processed before the City has received the necessary bids for the approved work. Any work started before a Letter of Commitment is executed is not eligible for reimbursement. Furthermore, any work that is more than the approved scope of work must be pre-approved by the City in order for the work to be eligible for reimbursement.

If Applicant is not the owner of the property (Owner), or if the Applicant is not the sole Owner, Applicant agrees that Applicant must cause the Owner to fill out and sign the Owner Authorization Form (page 8) and attach the signed Form to the application. Once the City has received a completed application, Applicant agrees to assist the City in verifying any of the information contained in the application from any available source.

By signing below, Applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a Tenant Improvement Grant and that the information is true and complete to the best of Applicant’s knowledge.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**PLEASE RETURN THIS APPLICATION AND SUPPLEMENTAL DOCUMENTS TO:**

Karla Antonini, Project Manager, Economic Development Department

City of Hillsboro

150 East Main Street, Hillsboro, OR 97123

503-681-6181

Karla.Antonini@Hillsboro-Oregon.gov

**Pilot: Tenant Improvement Grant  
Owner Authorization Form**

(Only required if Applicant is not the property owner)

**PROPERTY INFORMATION:**

Owner Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Tax Account Number: \_\_\_\_\_ Year Building Built: \_\_\_\_\_

Has this property received other public funding or grants in the past five years?  Yes  No

If yes, please describe: \_\_\_\_\_

**AUTHORIZATION, CERTIFICATION, AND CONSENT OF OWNER:**

I, \_\_\_\_\_ certify I am the property owner (Owner) of the building located at \_\_\_\_\_ in Hillsboro, Oregon (Building). I authorize \_\_\_\_\_, the business housed in my Building (Business), to accept grant funds from the City's Pilot: Tenant Improvement Grant to alter the look of the Building through interior rehabilitation work.

I certify that I have not received or obtained the benefit of Grant Funds for the Building within the last five years. (If I have received or obtained the benefit of Grant Funds before this application, then the amount was \$ \_\_\_\_\_ and the year was \_\_\_\_\_).

By signing below, Owner certifies that all information provided in this section is true to the best of Owner's knowledge.

\_\_\_\_\_

Printed Name of Owner

\_\_\_\_\_

Signature of Owner

\_\_\_\_\_

Date